

CONGRESS AND THE HEALTH OF THE PEOPLE*

The Honorable John E. Fogarty, (D) R.I.**

Dr. Shannon, Dr. Sessoms, Dr. Masur, ladies and gentlemen:

I am impressed indeed with the number and quality of ladies in this group. I am sure that if the President could be here this evening, he'd stop threatening to fire his information staff and replace them with Johnson City High School kids.

I am very glad to have this opportunity to address this meeting on the interplay of science, public policy and public information. It provides me with the first opportunity I have had to explore the state of the art of public information with those who are expert in the translation and interpretation of science, medicine, and related fields for the general public.

As all of you know, it has been my privilege to have had something to do with the field of medicine -- particularly medical research -- over the past 20-odd years. In that brief span, medical schools have gradually added the missing link in their communications with the community and the press; and the government agencies -- which formerly refused either to hire public information specialists or, if they did, took care to phoney their titles or otherwise hide them -- have come out into the open and assigned them important responsibilities.

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**Chairman, House Subcommittee on Appropriations

The results, of course, have been dramatic. No longer is it necessary for a reporter to make a dozen calls to a medical school to track down a needed bit of information. No longer is the Federal health agency operated like a close corporation: its business is virtually conducted in public. But the most heartening development of all has been the change in attitude on the part of the scientists and practitioners of medicine. Attitudes ranging from unresponsiveness and complete distrust of so-called outsiders has been changing to those of cooperation and helpfulness. You here tonight -- and your associates in the several media -- have played a large part in these changes and you are to be congratulated for it.

But with the expression of new emphasis on the service aspect of modern medicine and all that this implies in terms of needed facilities and professional manpower, it is more vital than ever before that there be no failure in communication with the general public. NIH is to be commended for calling this Seminar -- to enable you representatives of the academic world to meet and exchange views with your counterparts here at NIH. Your involvement in the shaping of public policy is great -- and in my opinion is going to become much greater.

Let me tell you why: the first session of the 89th Congress has provided the basic framework for vast new gains in health and medical education. I am very proud to have played a part in this, but I am convinced that only the right combination of public awareness and public support made it possible.

We have torn down some of the economic barriers separating our older citizens from the care they need.

We have taken steps to assure that top-quality medical care may be obtained in every region of our country by authorizing the bringing together of the worlds of medical research, medical education and medical practice.

We have greatly strengthened the ability of our health professional schools to prepare greater numbers of better trained practitioners to serve the medical, dental, nursing, and public health needs of the present and the future.

Further, Congress has extended and expanded the vaccination assistance and support of migrant health services, extended and expanded the Health Research Facilities Construction program, permitted Federal funds to support staffing of community mental health centers, and provided for a greatly improved system of medical libraries around this Nation. We have done all these things while at the same time providing the largest -- but still inadequate -- appropriation for medical research in history.

Now, this is an outstanding record, and all of us in the Congress are proud of it.

But we know that all of this was possible only because there was sufficient understanding and awareness among the people of this Nation of the possibilities for better health. Thus we in Congress were able to give these programs the boost they needed. Public policy and practical action came together in a happy meeting.

We in the Congress have a responsibility -- and the power -- to promote the general welfare; but we can not discharge the responsibility or exercise the power in a vacuum.

This is where you -- as public information people in Government and in the academic community -- come into the picture.

The newly authorized and expanded programs of the 89th Congress represent a considerable investment on behalf of the American people. Thus, the taxpayers not only have a right to know of the results of their investment but -- in certain of the programs -- an adequately informed public is an absolute necessity if the program is to succeed.

For example, a tremendous task lies ahead in seeing that the public is adequately informed about the many aspects of the Heart Disease, Cancer and Stroke program. The NIH public information staff -- as well as you, at the medical colleges and other institutions -- will have this job. In this instance, it will be particularly important to see that the public does not receive the wrong information. All of this means one thing: added responsibility -- a phrase you have heard numerous times in the past.

I am aware that already -- by the very nature of your functions -- you are involved in a wide array of activities.

I know, for example, of the fund-raising some of you must do to help your institutions as they improve their facilities. Earlier this month I was at the University of Utah for the dedication of the University's new Medical Center -- the largest public building in the State. That Center cost more than \$15 million, and, while State and Federal appropriations covered some of the construction costs, a considerable amount still had to be met by fund-raising. And just last week I learned of the University of Chicago's plan for raising \$160 million.

I am also aware of the amount of effort many of you devote to student recruitment programs, continuing professional education programs, and straight-forward community relations projects.

You may be concerned at times at the seeming fragmentation of your efforts, but I would hope that you can continue to meet your current responsibilities and at the same time interweave new responsibilities in such a way that -- regardless of the task -- directly or indirectly -- you contribute to an increased public understanding of science and medicine in today's and tomorrow's society.

Easier said than done, you say. And I must agree. But a start must be made. Perhaps the most important area to consider is that of human resources needed to do the job. Now if your field is typical, you might first start by asking yourselves where the new freshly trained manpower is coming from? I understand that NIH has a modest training program for young people entering this field but that its handful of vacancies has never been filled at any one time because sufficient numbers of qualified people simply have not been available.

You might ask yourselves whether there is sufficient awareness of the needs and opportunities in the field among students.

You might determine whether the journalism school in your area is aware of the extent to which science and technology pervades our daily lives and what the school is doing in response to it. And while you're at it, you might determine whether your

journalism school is even teaching its students to write. If there is substance to the charges in the current issue of Harpers, I wonder whether the journalism schools -- with the exception of a handful -- can be regarded as a reliable source of basically trained manpower for the health information field.

One more question on human resources. Has any one posed the outside possibility that the science departments and the medical schools should teach their students to write in a concise and orderly fashion? This would not only improve communications in a number of ways, but you might even be able to interest some of the science students in the health information field.

Now let me pose a question or two on the physical resources of the information business. I know you have progressed a long way from the days when the news release went out and the job was considered finished. Today you are using a wide variety of audio and visual materials to tell your stories. But don't forget that the tool department is being changed as much and as rapidly as the main areas of your interest -- science and medicine.

Just one example -- and you are all equally aware of it I know: Color television. There is no doubt that it is here to stay. Expanded color programming coupled with recent surveys that put science and medicine at the top of the public's interest list -- aside from spy stories -- means a tremendous opportunity for all of you.

Thus, the question: how many of you are geared to acquiring and making available materials for use in color TV? Let me phrase another question on your total activities. How many of you have a budget against which you can plan your projects and programs over a period of time? This approach -- as many of you have demonstrated -- permits the generation of new ideas and development of new approaches. Or do you find yourself passing the hat when a new emergency arises?

A third element -- the substantive content of your strictly public information activities -- concerns me.

It has long worried me -- and it worries me more and more -- that the public seems to have so little idea about the nature of the research process. It needs to be educated to realize that medical advances are the result of long and patient labor over a period of years -- rather than the result of pouring a few million dollars over a few gifted scientists working in well-equipped laboratories to produce instant cures.

I am concerned about the amount of science-fiction that is being given the public today in the guise of science reporting. This is the science news story without any perspective. The public needs to know -- for instance -- the difficulties in the way of developing the first successful implantation of a permanent, artificial heart at the same time that we hold out the promise of such a development.

Now let me turn to a fourth element, namely, cooperation. The fact that you are here, ready to consider, as a group, some of the factors that are important to your work, is commendable. If I have any criticism, it is that this meeting did not take place a year or two or three ago.

A closer involvement of public information people -- a closer identification by you and your staffs at universities and medical schools all over the country with National goals -- is called for. A closer coordination of your efforts with those of the National Institutes of Health is also highly desirable if you are to make your major contribution to the dialogue between the citizen and his government that is the hallmark of democracy.

We have been fortunate in the past 20 years, in this regard. We launched a post-World War II expansion of the National medical research effort largely upon the wave of public confidence that followed the successful scientific achievement of releasing nuclear energy.

To my mind, what has been made possible by the actions of the first session of the 89th Congress is an expression of a new wave of public confidence -- a wave of confidence that expresses satisfaction with and approval of our national efforts in medical science but indicates that the service aspects of medicine require greater attention.

Now if this wave is to be sustained we must satisfy the general public's right to know of the results of their investment, and, as I have said, in certain programs the public's right to begin to benefit directly from them through enlightened involvement.

You ladies and gentlemen, as representatives of highly respected institutions, and your colleagues at NIH can -- between you -- accomplish much of the education job that needs to be done. You and your staffs at the medical schools and universities can help shape the public policy goals of a modern, scientifically literate society.

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